



Atty. Dkt. No. 078883-0133

3751
#

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: James Keith HASLAM et al.
Title: MICROARRAYING APPARATUS,
PIN HEAD THEREFOR AND
SPOTTING METHOD

Appl. No.: 09/892,614

Filing Date: 06/28/2001

Examiner: Douglas, Steven O.

Art Unit: 3751

RECEIVED

AUG 13 2003

TECHNOLOGY CENTER R3700

AMENDMENT TRANSMITTAL

Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[X] Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a Small Entity statement previously submitted.

[] Small Entity statement is enclosed.

[X] The fee required for additional claims is calculated below:

	Claims as Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	20	X	20	=	0	x	\$18.00	=	\$0.00
Independents:	7	X	4	=	3	x	\$84.00	=	\$252.00
First presentation of any Multiple Dependent Claims:						+	\$280.00	=	\$0.00
CLAIMS FEE TOTAL:								=	\$252.00

[] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input type="checkbox"/>	Extension for response filed within the first month:	\$110.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$410.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$930.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,450.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$1,970.00	\$0.00
	EXTENSION FEE TOTAL:		\$0.00
<input type="checkbox"/>	Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$55.00	\$0.00
	CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$252.00
<input checked="" type="checkbox"/>	Small Entity Fees Apply (subtract 1/3 of above):		\$126.00
	TOTAL FEE:		\$126.00


- ☐ Please charge Deposit Account No. 19-0741 in the amount of \$126.00. A duplicate copy of this transmittal is enclosed.
- ☒ A check in the amount of \$126.00 is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. § 1.136 and authorizes payment of any such extensions fees to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date August 8, 2003

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By 
m.
Michele Simkin
Attorney for Applicants
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